# **Reporting Instructions for the SORAR-705 Form**

We expect it to take about 15 minutes to complete this questionnaire. It may take you more or less time depending on your circumstances. If you have any comments regarding this estimate, or any other aspect of this survey, including suggestions for reducing this burden, send them to: Paperwork Project 0607–0130, U.S. Census Bureau, 4700 Silver Hill Road, Stop 1500, Washington, DC 20233-1500. You may e-mail comments to Paperwork@census.gov; use "Paperwork Project 0607–0130" as the subject.

This survey has been approved by the Office of Management and Budget (OMB) and has been given an OMB approval number. This 8-digit number appears in the upper right-hand corner of the survey form. If this number were not displayed, we could not conduct this survey or request your participation.

### DO NOT DISCARD THE QUESTIONNAIRE

If you did not have expenditures for the quarter, please mark the appropriate box in Item 8 and return the form in the enclosed addressed envelope.

#### **EXPENDITURES**

If you are not sure if you have made any improvement or repair expenditures during the quarter, please review the expenditure categories listed on the back of the form (Items 10–15). If you are not sure if an expenditure is valid, either call our toll free number (1–800–845–8246) and ask for assistance or include the expenditure and a description in the "Comments" section and return the form.

### **HOW TO REPORT EXPENDITURES**

- Report dollar amounts spent during the quarter shown in Item 2a.
- Include the cost of materials and labor.
- Exclude any finance charges.
- Exclude expenditures for movable appliances, furniture, or carpeting.
- Report purchase of building materials to have on hand for future work under "Maintenance and Repairs – Code 498".
- If you are not sure of the exact amount, please enter your best estimate.

#### **TYPES OF EXPENDITURES**

<u>Additions</u> add floor space to the existing structure. Include rooms, attached garages, decks, and porches. A room conversion should be listed in the alteration section.

Alterations are changes or improvements made within or on the structure.

<u>Outside Additions and Alterations</u> relate to structures on the property that are not physically attached to the main structure. Examples include sheds, detached garages, swimming pools, driveways, and walks.

Major Replacements refer to the complete substitution of major building components.

<u>Maintenance and Repairs</u> are those expenditures that keep the property in ordinary working condition like painting a wall, wallpapering, patching the roof, or fixing a door hinge.

## **HOW TO REPORT LARGE JOBS**

We prefer as much detailed information as possible. Let's say you had a kitchen remodeling job that involved a new floor, sink and cabinets. The whole remodeling job cost \$4,300. If that is all you know about the cost of the job, we ask that you report the \$4,300 in the line marked "Kitchen remodeling." But if you know that the vinyl flooring cost \$700, the cabinets cost \$2,600, and the sink cost \$1,000, we ask that you report \$700 for "Flooring (tile, linoleum and/or vinyl)," \$2,600 for "Kitchen cabinets," and \$1,000 for "Kitchen plumbing fixtures."

OUE	DATE: WITHIN 1	10 DAYS AFTER REC	EIPT					OMB No. 0607	-0130: Appr	oval Exp	oires 12/31/2002		
	1 <b>SORAR-705</b> 2001)		only by sv	employe	es and	Bureau is confidential by law (title 13 U.S.Code). It may be seen d may be used only for statistical purposes. The law also files are immune from legal process.							
Q.	UARTERL OF RESIL ALTERATI REP	Y SURVEY DENTIAL ONS AND AIRS	provides	nat copies re	terrice ii	, your		ile ilolli legal p					
NO		ng this form, please 0-845-8246.	/DOLL				-	name, addre			0 : 1 "		
	egional Office coo	de   <b>B.</b> Control   Ar   Number		Segme	ent		egment suffix Year built	CQ G. Owr	CE Serial		Serial suffix       Status		
s	ample	property		Land usage			rear built	J G. OWI	iersnip		Status		
1.	PROPERTY COVERED BY THIS REPORT	FRED Number and street				City, State, and ZIP Code							
2a.	Were you the the quarter lis	Vere you the owner or agent for any part of he quarter listed in the box below?					Enter the full address (include name of project) which identifies the entire property for which you keep records of expenses.  Name (if any)						
	<ul> <li>1 ☐ Yes − Go to item 2c and complete this report from records covering this period.</li> <li>2 ☐ No − None of this quarter − Fill item 2b and return this report in the enclosed preaddressed envelope.</li> </ul>					Nı Ci	umber and str						
<b>2</b> b.	If not owner or agent for this property during the specified quarter, give present owner's name, address, and telephone number.					4. How many apartments or separate housing units are in all buildings on the property in item 1 or 3b above? (Include manager's and janitor's units.)  Number							
	Name of individual/agent  Name of company or complex				5.		half or mor	e of the floorty for reside	or space i	n the b	uilding(s)		
	Number and str	eet					☐ Half or more residential ☐ Less than half residential						
	City, State and ZIP Code  Area code   Telephone number					6. What is the form of ownership?  1 Privately owned 2 Publicly owned (public housing authority, State university, or other Federal, State, or local government agency)							
	1 ☐ Yes 2 ☐ No	ner live on this pro		e identify	7.	1		is building o	r comple	x origir	nally built?		
<ul> <li>3a. Does the address shown in item 1 above identify the entire property?</li> <li>1 Yes - Address identifies an entire property - Go to item 4</li> <li>2 No - Address is for an entrance or one building which is part of a larger property - Fill item 3b</li> </ul>					8.	0 ☐ Don't know  . Were there any expenditures for improvemen							
					ch	repairs to the property shown in item 1 or 3b during the quarter shown in item 2a?  Yes – Please complete item 9 and continue on reverse side.  No – Please complete item 9 and return this form in the enclosed preaddressed envelope.							
9.	PERSON COMPLETING THIS REPORT					Address (/	Number and s	street)					
		Area code   Numbe	Telep r		tension		City, State,	, and ZIP Cod	е				
Cor	nments												

Census use only	10.н	low much was spent on the f DDITIONS?	following	Census use only 13. How much was spent on the following MAJOR REPLACEMENTS?					
	101	Bathroom	\$		501	Plumbing fixtures	\$		
	102	Kitchen			502	Water heater, garbage disposal, laundry tubs			
	103	Other rooms (bedroom, sunroom, basement, etc.)			503				
	104	Deck or porch			504	All interior pipes			
		Attached garages, carport, or sheds			505	Heating and/or central air conditioning			
		Other – Describe			506	All wiring			
Census use only	11.н А	low much was spent on any o LTERATIONS?	of the following		507	All siding			
•	201	Bathroom plumbing fixtures	\$		508	Entire roof			
	202	Kitchen plumbing fixtures		-	509	Driveway or sidewalks			
	203	Other plumbing		<u> </u>	510	Windows and/or skylights			
	203	Insulation		-	511	Doors			
	204	Heating and/or central				Other – Describe			
	206	air conditioning  Electrical		Census use only		14. How much was spent on the following MAINTENANCE AND REPAIRS?			
	207	Security systems		-	401	Painting	\$		
	208				402	Wallpaper			
	209	Paneling and/or ceiling tile Flooring (tile, linoleum							
	210					Plumbing			
	040	marble, wood, etc.)			404	Heating and/or central air			
	213	Kitchen cabinets			400	conditioning			
	216	Garage door opener			406	Electrical			
	217	Siding			407	Siding			
	219	Windows and/or skylights				Roofing			
	220	Doors			409	J 1			
	211	Bathroom remodeling			410	Windows and/or skylights			
	212	Kitchen remodeling			411	Doors			
	214	Kitchen and bathroom remodeling combined			412	Recreational facilities (swimming pools, tennis courts, etc.)			
	215	Finishing unfinished space			498				
	218	Other remodeling of interior of the house				Other – Describe			
		Other – Describe		15a. D	-	ւ have salaried maintenance ր es – Continue with 15b	personnel?		
Census use only	12. How much was spent on the following ADDITIONS OR ALTERATIONS OUTSIDE OF THE RESIDENTIAL BUILDINGS?			□ No – End ————————————————————————————————————					
,	301			b. Do the estimates above include the labor costs of these maintenance personnel?  ☐ Yes – End					
	302	Other detached buildings (sheds, greenhouses)		☐ Yes - End☐ ☐ No - Continue with item 15c☐ Amount					
	202				c. Enter maintenance personnel payroll				
	303	Patios and/or terraces  External sprinkler system, septic tank, or wells		costs for this quarter \$ d. Approximately what PERCENT of costs were for –					
	305	Recreational facilities (swimming pools, tennis courts, etc.)		Census use only		Percent			
	306	Driveways and walks		Oilly	402	1. Painting, papering, etc.	Percent		
		·		1	499				
	307	Other –			433	3. Janitorial and other	9/		
ORM SORA		Describe				services	%		